BLENDON TOWNSHIP ZONING APPLICATION

Application for:			
Rezoning	Special La	and Use	Variance
Land Division	Site Plan	Review	Other
submitted at least 30 da	ays prior to the nex Zoning Board of Ap	at Planning Commopeals meeting. Si	te plan reviews must be
	APPLICANT I	NFORMATION	
Name:			
Address:			
Phone:	Fax:	E-mail:	
	OWNER IN	FORMATION	
Name:			
Address:			
Phone:	Fax:	E-mail: _	
	PROPERTY I	NFORMATION	
Address or location:			
Permanent Parcel #:			
Current Zoning:			
Property Size:	11		
DE	ESCRIPTION OF I	PROPOSED REQ	UEST

I herby grant permission of the Blendon Township Planning Commission, Zoning Board of Appeals, Township Board, Zoning Administrator to enter the above-described property (or as described in the attached) for the purpose of gathering information related to this application.

SIGNATURE OF APPLICANT				
DATE				
Application Fee \$	(separate check)			
Escrow Fee \$	(separate check)			
DO NO	T WRITE BELOW THIS LINE			
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Date material received	·			
Application fee paid \$	(Separate check)			
Escrow fee paid \$	(Separate check)			
Additional escrow fee paid \$_	(Separate check)			
Submitted materials:				
Site plan				
Application				
Legal Description				
Application accepted by:				
Date accepted				